## FORM 15

(REV. 2/2005)

## ARKANSAS STATE PLANT BOARD APPLICATION TO PRODUCE CERTIFIED SEED

(COMPLETE ALL BLANKS)

NAME	PHONE( <u>)</u> FAX( <u>)</u>
ADDRESS	
UPS ADDRESS	
EMAIL ADDRESS_	
1)	VARIETY & KIND (USE A SEPARATE APPLICATION FORM FOR EACH VARIETY)
I PLANTED	ACRES OF <u>BREEDER</u> SEED TO PRODUCE <b>FOUNDATION</b> GRADE SEED.
	ACRES OF <u>FOUNDATION</u> SEED TO PRODUCE <b>REGISTERED</b> GRADE SEED.
I PLANTED	ACRES OF <u>REGISTERED</u> SEED TO PRODUCE <b>BLUE TAG</b> GRADE SEED.
2) LAND HISTORY	(USE THE BACK OF THE FORM TO LIST LAND HISTORY) CHECK CIRCULAR 15 FOR LAND REQUIREMENTS
COMPLETE	FOR RICE - LAST 2 SUMMER CROPS FOR SMALL GRAINS - LAST 2 WINTER CROPS (EXCEPTION: IF LAND IS WINTER FALLOWED - SHOW LAST 2 SUMMER CROPS) FOR SOYBEANS - PREVIOUS CROP GROWN (EXCEPTION: IF THE PREVIOUS CROP WAS SOYBEANS, THE VARIETY MUST HAVI BEEN PLANTED WITH CERTIFIED SEED OF THE SAME VARIETY OR ANOTHER VARIETY WITH A DIFFERENT HILUM COLOR OR PUBESCENCE COLOR)
3) SEED SOURCE	SUBMIT AS PROOF, A CERTIFIED LABEL FROM EACH LOT, COPIES OF INVOICES AND/OR STATEMENTS SHOWING THE AMOUNT OF SEED AND ALL LOT NUMBERS PLANTED ON BACK OF FORM.
4) LIST NAME OF	FARM, FARM MANAGER & PHONE NUMBERS ON BACK OF FORM
FARM DIRECTI	ONS: MY FARM ISMILES NSEW FROMON HIGHWAY
THE HARVEST. A G	A DETAILED MAP WITH LANDMARKS. TIME BECOMES CRITICAL FOR YOU AND FOR OUR INSPECTORS DURING OOD MAP WILL ALLOW THE INSPECTOR TO FIND THE RIGHT FIELDS. EVEN IF YOU PLAN TO HAVE SOMEONE DW THE INSPECTOR THE FIELDS, PLEASE ENCLOSE A MAP.
5) ENTER YOUR A	REA FIELD INSPECTOR'S NAME:
6) (YES, I DO)	(NO, I DON'T) WANT MY CERTIFIED ACREAGE TO BE SHOWN IN THE SEED DIRECTORY.
7) A SEED DEALE	R'S LICENSE OR CERTIFICATION PERMIT IS REQUIRED:  SEED DEALER'S LICENSE APPLICATION:ENCLOSEDON FILE CERTIFICATION PERMIT APPLICATION:ENCLOSEDON FILE
8) OPERATE A SE	ED CLEANING FACILITY:YES/NO OPERATOR IN CHARGE:
9) FEES ENCLOSE	ED:
\$PROM	OTIONAL FEE (\$0.10 PER ACRE)
\$ACREA	AGE (\$1.50 PER ACRE FOR ALL CROPS EXCEPT RICE, WHICH IS \$2.25 PER ACRE).
\$ <u>20.00</u> VARIE	TAL FEE
\$LATE F	FEE ADD \$50.00 IF FILED AFTER DEADLINE (SMALL GRAINS - APRIL 1; RICE - JULY 1; SOYBEANS - AUG. 15)
\$TOTAL	ENCLOSED
AND CONDITIONING	THAT THE INFORMATION GIVEN HEREIN IS TRUE AND CORRECT AND THAT THE PLANTING, HARVESTING, BEQUIPMENT WILL BE CLEANED AND THE IDENTITY OF THE SEED WILL BE MAINTAINED FROM THE TIME OF LEAVES MY POSSESSION.
SIGNED	DATE

## **CONTACT GROWER INFORMATION**

CONTRACT GROWER *(ONE PER APPLICATION)*				FARM NAME							
PHONE #()		FAX # <u>(</u>	)		CELL/N	OBIL PHO	NE # <u>(</u> )				
ADDRESS						ZIP					
							TATEMENTS SHOWING LOT CEPT SOYBEANS (CHECK CIR.				SED.
VARIETY:	NUMBER OF	FIELD NUMBER	GRADE PLANTED	PLANTING DATE	LOT NUMBER	BUSHELS PLANTED	NAME OF SEEDSMAN ON THE LABEL	CROP LAST	CROP LAST	CROP SUMMER	CROP WINTER
GROWER CITY NEAREST FIELD	ACRES PLANTED							SUMMER*	WINTER*	BEFORE LAST*	BEFORE LAST*
TOTALS											

## ARKANSAS STATE PLANT BOARD FIELD INSPECTION MAP

COMPANY:								
CONTRACT GROWER:								
FIELD DIRECTIONS:								
MAP COORDINATES: Latitude		Longitude						
	N							

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Please use this form to show your field(s) unless you already have maps. Label each field with Variety, Grade, and Acreage. **Do not send in aerial photographs.** County maps showing all county roads are acceptable. **Please make copies of form if additional copies are needed.** 

PLEASE SEND IN A DETAILED MAP EVEN IF YOU PLAN TO SHOW THE INSPECTOR(S) THE FIELDS.